

APPLICATION FOR
FEDERAL ASSISTANCE

1. TYPE OF SUBMISSION: Application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction		2. DATE SUBMITTED 11/15/05		Applicant Identifier	
		3. DATE RECEIVED BY STATE		State Application Identifier	
Preapplication <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction		4. DATE RECEIVED BY FEDERAL AGENCY		DUNS #: 152784520	
5. APPLICANT INFORMATION					
Legal Name: Wythe County School System			Organizational Unit: Office of Teacher Training		
Address (give city, county, State, and zip code): 219 Main Street Wytheville, VA 12345			Name and telephone number of person to be contacted on matters involving this application (give area code) Name Janet Jones (Tel) 540-223-4567 Email jones.j@wcs.edu (Fax) 540-223-7890		
6. EMPLOYER IDENTIFICATION NUMBER (EIN): <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px 5px; margin: 0 2px;">1</div> <div style="border: 1px solid black; padding: 2px 5px; margin: 0 2px;">2</div> <div style="margin: 0 5px;">—</div> <div style="border: 1px solid black; padding: 2px 5px; margin: 0 2px;">3</div> <div style="border: 1px solid black; padding: 2px 5px; margin: 0 2px;">4</div> <div style="border: 1px solid black; padding: 2px 5px; margin: 0 2px;">5</div> <div style="border: 1px solid black; padding: 2px 5px; margin: 0 2px;">6</div> <div style="border: 1px solid black; padding: 2px 5px; margin: 0 2px;">7</div> <div style="border: 1px solid black; padding: 2px 5px; margin: 0 2px;">8</div> <div style="border: 1px solid black; padding: 2px 5px; margin: 0 2px;">9</div> </div>			7. TYPE OF APPLICANT: (enter appropriate letter in box) B		
8. TYPE OF APPLICATION: <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision </div> If Revision, enter appropriate letter(s) in box(es) <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 30%;"> A. Increase Award D. Decrease Duration </div> <div style="width: 30%;"> B. Decrease Award Other(specify): </div> <div style="width: 30%;"> C. Increase Duration </div> </div>			<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> A. State C. Municipal D. Township E. Interstate F. Intermunicipal G. Special District </div> <div style="width: 50%;"> H. Independent School Dist. I. State Controlled Institution of Higher Learning J. Private University K. Indian Tribe L. Individual M. Profit Organization N. Non-Profit O. Other (Specify) _____ </div> </div>		
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: <div style="display: flex; align-items: center; margin-top: 10px;"> <div style="border: 1px solid black; padding: 2px 5px; margin: 0 2px;">6</div> <div style="border: 1px solid black; padding: 2px 5px; margin: 0 2px;">6</div> <div style="margin: 0 5px;">—</div> <div style="border: 1px solid black; padding: 2px 5px; margin: 0 2px;">9</div> <div style="border: 1px solid black; padding: 2px 5px; margin: 0 2px;">5</div> <div style="border: 1px solid black; padding: 2px 5px; margin: 0 2px;">1</div> </div> TITLE: Environmental Education Grant			9. NAME OF FEDERAL AGENCY: U.S. Environmental Protection Agency		
12. AREAS AFFECTED BY PROJECT (Cities, Counties, States, etc.): 3 Counties: Wythe, Smith, Green			11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: "Eco-Blue" Teacher Training -- Ecosystems in the Blue Ridge Mountains		
13. PROPOSED PROJECT		14. CONGRESSIONAL DISTRICTS OF:			
Start Date 7/1/06	Ending Date 6/30/07	a. Applicant <div style="text-align: center; margin-top: 10px;">02</div>		b. Project <div style="text-align: center; margin-top: 10px;">02, 04, 12</div>	
15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?			
a. Federal <div style="text-align: right; margin-top: 10px;">10,000⁰⁰</div>		a. YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON: DATE _____			
b. Applicant <div style="text-align: right; margin-top: 10px;">3,000⁰⁰</div>		b. No. <input checked="" type="checkbox"/> PROGRAM IS NOT COVERED BY E. O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW			
c. State <div style="text-align: right; margin-top: 10px;">00⁰⁰</div>		17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT? <input type="checkbox"/> Yes If "Yes," attach an explanation. <input type="checkbox"/> No			
d. Local <div style="text-align: right; margin-top: 10px;">00⁰⁰</div>					
e. Other <div style="text-align: right; margin-top: 10px;">334⁰⁰</div>					
f. Program Income <div style="text-align: right; margin-top: 10px;">00⁰⁰</div>					
g. TOTAL <div style="text-align: right; margin-top: 10px;">13,334⁰⁰</div>					
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.					
a. Type Name of Authorized Representative John Smith		b. Title Superintendent of Schools		c. Telephone Number (540) 223-4231	
d. Signature of Authorized Representative <i>John Smith</i>				e. Date Signed 11/15/05	

BUDGET INFORMATION - Non-Construction Programs

OMB Approval No.: 0348-0044

SECTION A - BUDGET SUMMARY

EXAMPLE

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY		Total (5)
	(1) Federal Funds	(2) Non-Federal Match	
a. Personnel	\$ 4,200	1,600	\$ 5,800
b. Fringe Benefits	525	200	725
c. Travel	500	200	700
d. Equipment			
e. Supplies	2,300	1,000	3,300
f. Contractual	1,075		1,075
g. Construction	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX
h. Other	1,400	334	1,734
i. Total Direct Charge (sum of 6a-6h)	10,000.00	3,334.00	13,334.00
j. Indirect Charges			
k. TOTALS (sum of 6i and 6j)	\$ 10,000.00	\$ 3,334.00	\$ 13,334.00
7. Program Income	\$	\$	\$

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